

● PRINTER RUSH ●

(PTO ASSISTANCE)

3rd request

| | | |
|---------------------------------|--------------------------------|---------------------------|
| Application : <u>09/254 119</u> | Examiner : <u>A. Chambliss</u> | GAU : <u>2814</u> |
| From: <u>RP</u> | Location: <u>(IDC) FMF FDC</u> | Date: <u>11/22/05</u> |
| Tracking #: <u>0610 1185</u> | | Week Date: <u>5/02/05</u> |

| DOC CODE | DOC DATE | MISCELLANEOUS |
|--|----------------|--|
| <input type="checkbox"/> 1449 | _____ | <input type="checkbox"/> Continuing Data |
| <input type="checkbox"/> IDS | _____ | <input type="checkbox"/> Foreign Priority |
| <input checked="" type="checkbox"/> CLM | <u>2/28/05</u> | <input type="checkbox"/> Document Legibility |
| <input checked="" type="checkbox"/> IIFW | <u>3/15/05</u> | <input type="checkbox"/> Fees |
| <input type="checkbox"/> SRFW | _____ | <input type="checkbox"/> Other |
| <input type="checkbox"/> DRW | _____ | |
| <input type="checkbox"/> OATH | _____ | |
| <input type="checkbox"/> 312 | _____ | |
| <input type="checkbox"/> SPEC | _____ | |

[RUSH] MESSAGE: _____

Please correct second claim dependency of original claim # 3 (now # 2) which depends on original claim # 17 (now # 6).

Thank you,
RP

[XRUSH] RESPONSE: _____

INITIALS: _____

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04